New Zealand Branch. It is understood that the report will form the basis of any legislation that may be introduced dealing with national medical service. The Council expresses appreciation of a growing disposition on the part of the Government to consult the Association on all matters bearing on the health of the community. At the last annual meeting it was urged that the Model Agreement for Lodge Practice prepared before the outbreak of war should be launched forthwith, but after prolonged discussion it was resolved that the question of a general introduction of the model agreement throughout the Dominion should be deferred until the meeting at Napier in 1921. Members were, however, instructed that when new arrangements were being entered into with lodges they should follow closely the lines of the proposed model agreement. Other questions which arose during 1920 included hospital abuse, legislation for combating venereal diseases, a proposed Fellowship of Surgeons for New Zealand, a proposed co-operative supply dépôt for the Branch, a cadet movement, and the working conditions of nurses. Fully one-half of the members of the New Zealand Branch are stated to be subscribers to the New Zealand Medical Benevolent Fund. Necessitous cases arise from time to time among members of the profession or their families which, in the absence of such a fund, it would be impossible to assist without making special appeals to members. With regard to the Medical Defence Insurance Scheme, it is stated that members of the Branch, almost without exception, are now paying the annual premium of 8s., which entitles them to the benefits of the defence insurance policy. The report ends by recording that in June, 1918, the Branch Council resolved that at the termination of the war members who had been away from New Zealand on active service should be granted a refund of a large proportion of the subscriptions paid by them while so absent. Accordingly the sum of £342 has this year been refunded, with the anticipated result, that the statement of accounts shows an excess of expenditure over income. It is, however, regarded as highly satisfactory that the loss on the year's working is not more than £52, since the refunds extending over a period of five years had to be provided for in one year. During the whole of the war period the New Zealand Branch of the British Medical Association, in supporting the Government of the country, took its full share of responsibility. The endeavour of the Council has been to carry out its obligations with due regard to economy, and it is gratifying to find the Branch in the strong financial position it occupies to-day.

COUNCIL ELECTION.

THE names of the members already declared elected to the Council for 1921–22 in respect of the eight Groups of Branches in which there were no contests were published in the SUPPLEMENTS of May 21st (p. 192) and May 28th (p. 197). The following is the detailed result of the voting in the four groups where a contest took place:

Metropolitan Counties Branch.

The voting paper contained the names of six candidates for the four vacancies. The voting was on the single transferable vote system. Out of 2,839 voting papers issued, 732 were returned, of which 19 were spoilt, leaving 713 valid votes. The quota was therefore 143—that is, 713 divided by 5 (one more than the number of seats to be filled) *plus* one. The result of the first count was:

Dr. H. S. Beadles	143	Elected
Dr. C. Buttar	170	Elected
Lord Dawson of Penn	196	Elected
Mr. Bishop Harman	103	
Dr. Langdon Down	48	
Dr. William Paterson	53	
	713	

Dr. Beadles's votes equalling the quota, while Lord Dawson's and Dr. Buttar's exceeded the quota, all three were declared elected. Lord Dawson having the highest number it became necessary to transfer his surplus 53 votes. The whole of his 196 votes were examined, and the distribution of the 53 surplus votes according to the second preferences indicated resulted as follows:

Dr. Beadles	—	143	Elected
Dr. Buttar	—	170	Elected
Lord Dawson of Penn	− 53	143	Elected
Mr. Bishop Harman	+ 34	137	
Dr. Langdon Down	+ 14	62	
Dr. Paterson	+ 5	58	
		713	

No further candidate having secured the necessary quota of 143 votes, the next step was to transfer Dr. Buttar's surplus 27 votes. The whole of Dr. Buttar's 170 papers were examined and his 27 surplus votes distributed according to the second preferences indicated thereon, with the result that Mr. Bishop Harman secured the necessary quota and was declared elected:

Dr. Beadles	—	143	Elected
Dr. Buttar	− 27	143	Elected
Lord Dawson of Penn	—	143	Elected
Mr. Bishop Harman	+ 15	152	Elected
Dr. Langdon Down	+ 9	71	
Dr. Paterson	+ 3	61	
		713	

Birmingham and Staffordshire Branches.

The two candidates for the vacancy in connexion with the above Group were Dr. H. C. Mactier of Wolverhampton and Dr. W. A. W. Nuthall of Birmingham. Out of 851 voting papers issued, 346 were returned, two of which were spoilt. Of the remainder, 244 were in favour of Dr. Nuthall and 100 in favour of Dr. Mactier. Dr. Nuthall therefore becomes a member of Council for 1921–22.

Kent, Surrey, and Sussex Branches.

1,146 voting papers were issued to the members of this Group, the candidates being Dr. E. R. Fothergill of Hove and Dr. Arnold Lyndon of Hindhead, Surrey. 458 papers were returned, 260 being in favour of Dr. Fothergill, 193 in favour of Dr. Lyndon, five being spoilt. Dr. Fothergill therefore is elected.

Bath and Bristol, Gloucestershire, West Somerset, and Worcestershire and Herefordshire Branches.

The candidates here were Dr. H. C. Bristowe of Wrington, Somerset, and Dr. A. O. Holbeche of Worcester. 290 papers were returned out of 626 issued. Dr. Bristowe secured 229 votes, Dr. Holbeche 59, and two were spoilt. Dr. Bristowe is therefore elected.

Meetings of Branches and Divisions.

BATH AND BRISTOL BRANCH: BATH DIVISION.

THE annual meeting of the Bath Division was held on May 26th. The following officers were elected for the ensuing year:

Chairman: Dr. A. E. Norburn. *Vice-Chairman:* Dr. J. Wigmore. *Secretary and Treasurer:* Mr. W. G. Mumford. *Representative in Representative Body:* Dr. N. Lavers. *Deputy Representative:* Dr. R. G. Gordon.

The Annual Report of the Central Council was discussed and the Representative was instructed to oppose any resolution in favour of paying patients being taken into Poor Law infirmaries, as the meeting considered this to be detrimental to the continuance of the voluntary system. The Representative was also instructed to support the proposal for the formation of a Central Medical Committee as representative of the whole profession.

DORSET AND WEST HANTS BRANCH.

THE annual meeting of the Dorset and West Hants Branch was held at Yeovil on March 18th. The following resolution was adopted:

"This meeting approves the resolution of the last Annual Representative Meeting, in respect of the payment of members of staffs of voluntary hospitals, for the treatment of discharged and disabled soldiers and sailors, and affirms the principle of adequate remuneration by the State for the treatment in voluntary hospitals of all State or rate-aided patients for whom the State has accepted responsibility."

The presidential address was delivered by Dr. F. C. BOTTOMLEY, O.B.E., on "Experience of two recent methods of treatment," and was highly appreciated.

At the close of the meeting, which was attended by thirty-six, the members were entertained to tea by the kind invitation of Dr. Norman Flower.

DORSET AND WEST HANTS BRANCH: BOURNEMOUTH DIVISION.

AT the annual meeting of the Bournemouth Division, held on May 13th, the following officers were elected for the coming year:

Chairman: Dr. A. Humphry Davy. *Vice-Chairman:* Dr. C. B. Thomson. *Representative in Representative Body:* Dr. E. K. Le Fleming. *Deputy Representative in Representative Body:* Dr. A. G. S. Mahomed. *Honorary Secretary and Treasurer:* Dr. E. C. Bond.

On the motion of Dr. W. ASTEN, seconded by Dr. J. F. BRISCOE, the following resolution was passed, and directed to be forwarded for inclusion on the Agenda of the forthcoming Representative Meeting:

That the Representative Body supports the recommendations contained in the Interim Report of Lord Cave's Committee with reference to the disposal, in the interest of hospitals, of the surpluses of approved societies; that it instructs the Insurance Acts Committee to approach the Ministry of Health and the approved societies with a view to establishing upon a just basis a satisfactory method of payment by the approved societies to the various hospitals for their treatment of insured persons.

METROPOLITAN COUNTIES BRANCH: HARROW DIVISION.

AT a meeting of the Harrow Division held on May 31st the following officers were elected for 1921–22:

Chairman: Dr. H. J. Hildige. *Vice-Chairman:* Dr. C. E. Goddard, O.B.E. *Representative in Representative Body:* Dr. H. L. Hatch. *Honorary Secretary:* Dr. C. F. Mayne, O.B.E.

Mr. H. S. SOUTTAR gave a most interesting and lucid exposition of the National Provident Scheme for Hospital and Additional Medical Services. A free discussion followed, and the meeting concluded with a hearty vote of thanks to Mr. Souttar for his attendance.

On May 25th the Division gave a farewell dinner to Dr. H. S. Wansbrough Jones, prior to his retirement from practice and the district. There was a gathering of about twenty, and a very pleasant evening was spent. The chairman of the evening, Dr. S. H. A. LAMBERT, in a happy speech proposed the health of the guest of the evening, and presented him with a gold wristlet watch, the gift of members of the Division. Dr. JONES, in his reply, referred to the twenty-five years he had practised in Harrow, and laid stress on the influence of the British Medical Association in cementing the practitioners of the district together.

METROPOLITAN COUNTIES BRANCH: KENSINGTON DIVISION.

THE annual general meeting of the Kensington Division was held on May 23rd.

The following officers were elected:

Chairman: Dr. W. E. Fry. *Representatives in Representative Body:* Mr. E. B. Turner, Dr. Christine Murrell, Dr. F. C. Martley. *Deputy Representatives:* Dr. W. E. Fry, Mr. H. M. Stratford. *Representatives on Branch Council:* Drs. A. J. Rice-Oxley, C.B.E., H. Sanguinetti, H. Tanner, C. Buttar, and H. M. Stratford. *Honorary Secretary and Treasurer:* Dr. F. C. Martley.

The following resolution was directed to be transmitted to the Annual Representative Meeting:

That it be an instruction to the Council to report whether additional medical services instituted or paid for by the State or Municipality should be open to all members of the community, and if so, on what terms or arrangements as to payment.

NORTHERN COUNTIES OF SCOTLAND BRANCH: BANFF, ELGIN, AND NAIRN DIVISION.

THE annual meeting of the Division was held at Elgin on May 13th. The following office-bearers were elected for the year:

President: Dr. Hendry. *Vice-President:* Dr. George Wilson. *Honorary Secretary and Treasurer:* Dr. Robertson. *Representative in Representative Body:* Dr. Cruickshank. *Deputy Representative in Representative Body:* Dr. Beaton.

A vote of thanks was accorded to Dr. Sellar in appreciation of his valuable work as honorary secretary and treasurer.

The meeting had under consideration the proposals for federation, and it was the general feeling that the Representative should be asked to vote for the scheme whereby medical men only are included.

NORTH OF ENGLAND BRANCH: CLEVELAND DIVISION.

A MEETING of the Cleveland Division was held on May 26th. The following office-bearers were elected for 1921–22:

Chairman: Mr. W. S. Dickie. *Chairman-elect:* Dr. James Donaldson. *Honorary Secretary and Treasurer:* Dr. G. H. Lowe. *Representative in Representative Body:* Dr. G. H. Lowe. *Deputy Representative:* Dr. J. Brownlee.

The following motion was adopted and directed to be forwarded to the Annual Representative Meeting:

That the fee for suturing perineum, for removal of adherent or retained placenta, for exploration of the uterus, for the treatment of *post-partum* haemorrhage, or for any operative emergency arising directly from parturition, including all subsequent necessary visits during the first ten days, inclusive of the day of birth, should be increased from one guinea to two guineas. That the fee for attendance at or in connexion with an abortion or miscarriage, including the subsequent visits during the ten days after, and including the first visit, should be increased from one guinea to two guineas.

The HONORARY SECRETARY reported that the Middlesbrough Watch Committee had increased the fees payable to medical practitioners called by the police to street accidents or other emergency to 7s. 6d. between 8 a.m. and 8 p.m., and 15s. between 8 p.m. and 8 a.m.

SOUTH MIDLAND BRANCH: NORTHAMPTON DIVISION.

AT the annual meeting of the Northampton Division held on May 24th the following officers were elected:

Chairman: Dr. W. E. Audland. *Vice-Chairman:* Dr. L. Dryland. *Honorary Secretary:* Dr. W. M. Robson (re-elected). *Representative in Representative Body:* Dr. J. P. Roughton. *Deputy Representative:* Dr. D. G. Greenfield. *Representatives on Branch Council:* Drs. Arthur, More, and Smartt.

With regard to fees under the Lunacy and Mental Deficiency Acts it was agreed to ask for £1 1s. in all cases, which appeared to be the usual one paid in the Division.

SOUTH-WESTERN BRANCH: WEST CORNWALL DIVISION.

AT a meeting of the Division the following resolution was adopted on the report of the Council regarding federation:

That the West Cornwall Division of the British Medical Association regrets the action of the Council of the Association in omitting from list of representative bodies the Medico-Political Union and the Northern Medical Union. It feels strongly that these two bodies represent a considerable number of colleagues in general practice, and, therefore, they should be invited to join any body formed to represent the medical profession.

STAFFORDSHIRE BRANCH: SOUTH STAFFORDSHIRE DIVISION.

A MEETING of the South Staffordshire Division was held on May 31st. The following officers have been elected for 1921–22:

Chairman: Dr. F. A. Cooke. *Vice-Chairman:* Dr. F. R. Turton. *Hon. Secretary and Treasurer:* Dr. H. C. Mactier, M.B.E. *Representative in Representative Body:* Dr. H. C. Mactier. *Deputy Representative:* Dr. Ridley Bailey.

Dr. T. C. Craig was nominated a member of the Wolverhampton After-Care Committee, in place of the late Dr. J. A. Codd.

The annual report of the Central Council was considered and the Representative instructed to move an amendment in connexion with Section 45 of the report, referring to members of Council and membership *ex officio* of Branch Council.

A vote of thanks to the retiring Chairman, Dr. F. R. Turton, was carried with acclamation.

SURREY BRANCH: CROYDON DIVISION.

THE annual meeting of the Croydon Division was held at the Croydon General Hospital on May 25th, when Dr. E. F. S. GREEN was in the chair.

A vote of condolence was passed to the family of the late Dr. Peter Duncan.

The following officers were elected for 1921–22:

Chairman: Mr. G. E. Newby, O.B.E., F.R.C.S. *Vice-Chairman:* Dr. E. F. S. Green. *Honorary Secretary:* Dr. C. G. C. Scudamore. *Representative in Representative Body:* Dr. C. G. C. Scudamore. *Deputy Representative:* Dr. G. G. George.

It was resolved to hold later a meeting to discuss the annual report of the Central Council and to instruct the Representative.

A clinical meeting was then held, under the chairmanship of Mr. CHARLES WRAY, F.R.C.S., when a series of exhibits were shown.

SUSSEX BRANCH: HASTINGS DIVISION.

THE recently-resuscitated Hastings Division held a very successful meeting on June 3rd at the Albany Hotel. All medical men in the Division area and their wives were invited, and there was a good attendance. There was a short address by the Chairman, Dr. J. D. HESSEY, and an excellent musical programme, followed by light refreshments. During the evening Dr. L. A. PARRY, of Hove, by invitation gave an address on the work of the British Medical Association, and on the motion of the Secretary of the Division, Dr. CHARNOCK SMITH, he was accorded a hearty vote of thanks.

MEETINGS TO BE HELD.

BIRMINGHAM BRANCH: CENTRAL DIVISION.—The annual meeting of the Central Division will be held at 18, Bennett's Hill, on Thursday, June 16th, at 3.45 p.m. Agenda: To instruct Representatives. To elect officers for ensuing year. Nominations for officers must be in the hands of the Honorary Secretaries fourteen days before the meeting. Members are requested to bring with them copies of the SUPPLEMENT of April 30th.

CAMBRIDGE AND HUNTINGDON BRANCH.—The seventy-seventh annual meeting of the Branch will be held at Harlech House, Burwell, on Friday, July 1st, at 12.30 p.m., when the financial statement for the past year will be presented and the officers for 1921–22 elected. Luncheon, by the kind invitation of the president-elect, Mr. O. R. Ennion, will be served in the Gardner Memorial Hall at 1.30 p.m. At 2.45 p.m. Mr. Ennion will deliver his presidential address, entitled "With the field ambulance at Gallipoli." At 4 p.m. Mr. and Mrs. Ennion will be "At home" at Harlech House.

EAST YORKS AND NORTH LINCOLN BRANCH.—The sixty-fifth annual meeting of the above Branch will be held at Grimsby on Friday, July 15th. The place and hour of meeting will be announced later. Business: Election of officers and presidential address. Nominations must be in the hands of the honorary secretary before July 1st.

METROPOLITAN COUNTIES BRANCH.—The annual general meeting of the Metropolitan Counties Branch will be held at 429, Strand, W.C., on Friday, June 24th, at 4 p.m. Business: (1) Report of scrutineers as to the election of new officers. (2) Annual Report of Council. (3) Alteration in Rule 11 by the insertion of words providing that such members of the Branch as are members of the Central Council shall be *ex officio* members of the Metropolitan Counties Branch Council. (4) President's address by Dr. H. B. Brackenbury, on "The Psychologist in Public Life."

METROPOLITAN COUNTIES BRANCH: HAMPSTEAD DIVISION.—The annual meeting will be held at the Hampstead General Hospital, Haverstock Hill, on Thursday, June 16th, at 5 o'clock. Agenda: (1) Elect officers and members of the Executive Committee for the ensuing year. (2) Receive annual report of the Executive Committee. (3) Consider business of the Annual Representative Meeting. (4) Other business. Tea at 4.45 p.m.

OXFORD AND READING BRANCH.—The annual meeting of the Branch will be held at Maidenhead on Wednesday, June 29th, at the Town Hall. Any members wishing to show cases or read

notes should communicate with Dr. E. W. Squire, 223, King's Road, Reading, before June 19th. Dinner will be arranged afterwards at one of the riverside hotels. Those intending to be present and having room in their cars or requiring a lift are asked to write to the secretary.

SOUTH WALES AND MONMOUTHSHIRE BRANCH.—The annual meeting of the South Wales and Monmouthshire Branch will be held at the Council Chamber, Barry, Glamorganshire, on Thursday, June 23rd, at 3.30 p.m.

SOUTH-WESTERN BRANCH.—The eighty-first annual meeting of the Branch will be held on Wednesday, June 15th, at the White Hart Hotel, St. Austell, at 3.15 p.m., when Dr. Jonas will resign the chair to Dr. Shaw, who will deliver his inaugural address. The report of the Branch Council for 1920-21 and the annual financial statement for 1920 will be presented and the Branch officers will be elected for 1921-22. Luncheon, by the kind invitation of the President-elect, will take place from 1 to 2.15 p.m., at the hotel. Dr. Shaw asks those intending to be present to send him written acceptance. The annual dinner of the Branch will be held at 7.45 p.m. at the hotel. Tickets, 10s. 6d. each (exclusive of wine), can be had from Dr. W. Gilchrist, High Cross House, St. Austell; early application is desired. Golf and bowls and excursions can be arranged. Mrs. Shaw will be at home at "Ardmore" at 4.30. Several St. Austell members are willing to accommodate visitors for the night, while there will also be accommodation at the hotel.

SURREY BRANCH.—The annual meeting of the Surrey Branch will be held at Guildford on Friday, July 8th.

SUSSEX BRANCH: HASTINGS DIVISION.—A general meeting of the Hastings Division will be held at the Eversfield Hotel, Hastings, on Tuesday, June 14th, at 4.30 p.m.

WORCESTERSHIRE AND HEREFORDSHIRE BRANCH.—The annual meeting of the Worcestershire and Herefordshire Branch will be held at the Infirmary, Worcester, on June 30th, at 3 p.m.

YORKSHIRE BRANCH: SHEFFIELD DIVISION.—A general meeting of the Sheffield Division will be held at the Church House, St. James Street, Sheffield, on Friday, June 17th, at 8.30 p.m. Agenda: Consider Report of Council and instruct Representatives. Members are requested to bring with them the SUPPLEMENT of April 30th.

MALAYA BRANCH.—Meetings of the Malaya Branch are held in Singapore on the third Thursday of each month. Members desiring to contribute papers are requested to communicate with the honorary secretary, Dr. J. W. Scharff, care of Port Health Office, Singapore. Arrangements can be made for the exhibition of specimens or cases of interest brought to the meetings.

Association Notices.

REPRESENTATIVE MEETING.

DATE.

THE Annual Representative Meeting at Newcastle will begin on Friday, July 15th, 1921, at 10 a.m.

NOTICES OF MOTION AND AMENDMENT BY DIVISIONS AND BRANCHES.

The Supplementary Report of Council to the Representative Meeting will appear in the SUPPLEMENT of July 2nd, 1921.

Notices of Motion and Amendment by Divisions and Branches for consideration by the Annual Representative Meeting will be published in the SUPPLEMENT as they are received, but none can be published later than July 2nd, for which purpose they must be received by the Medical Secretary not later than the first post on Monday, June 27th.

It will be possible, however, to include in the Agenda for the Annual Representative Meeting all Notices of Motion and Amendment which are received by the Medical Secretary *not later than the first post on Monday, July 4th, 1921.*

NOTICES OF MOTION BY DIVISIONS FOR THE ANNUAL REPRESENTATIVE MEETING, NEWCASTLE, 1921.

By BEDFORD DIVISION:

That new members be elected by a general meeting of the Division in which they reside, and not by the Branch Council.

By KENSINGTON DIVISION:

That it be an instruction to the Council to report whether additional medical services instituted or paid for by the State or municipality should be open to all members of the community, and if so, on what terms or arrangements as to payment.

By CAMBRIDGE AND HUNTINGDON DIVISION:

That, with reference to paras. 65, 66, and 85 of the Annual Report of Council (SUPPLEMENT, April 30th, 1921, pp. 112, 114, 115), it be an instruction to the Council to make provision so that a postal vote on any question of policy or otherwise may be taken by any Branch or Division after the question has been discussed at a meeting of that Branch or Division, and if the members present at that meeting deem such a vote desirable.

By Dr. C. O. HAWTHORNE (Marylebone):

That the recommendation included in para. 55 of the Annual Report of Council (SUPPLEMENT, April 30th, 1921, p. 112) be amended to read as follows:

"That it be an instruction to the Council to take steps to redraft By-law 26 so that after the word 'expenses' (line 3) the by-law shall read, 'and shall pay to each of its constituent Divisions the sum necessary to meet the ordinary expenses of the Division. In addition, the Branch Council may on application from any Division included within the area of the Branch, and on conditions defined by the Branch Council, make an additional grant or grants to a Division in order to meet any extraordinary expenses contemplated by the Division. In the event of the Branch Council refusing an application of this order it shall be open to the Division concerned to appeal against the decision to the Council of the Association.'"

By CLEVELAND DIVISION:

That the fee for suturing perineum, for removal of adherent or retained placenta, for exploration of the uterus, for the treatment of *post-partum* haemorrhage, or for any operative emergency arising directly from parturition, including all subsequent necessary visits during the first ten days inclusive of the day of birth, should be increased from one guinea to two guineas.

By CLEVELAND DIVISION:

That the fee for attendance at or in connexion with an abortion or miscarriage, including the subsequent visits during the ten days after, and including the first visit, should be increased from one guinea to two guineas.

By SOUTH STAFFORDSHIRE DIVISION:

That Recommendation 45 of the Council (SUPPLEMENT, April 30th, 1921, p. 110) be amended to read as follows:

"That it be an instruction to the Council to take steps for amendment of By-law 16 (*a*) so as to provide that the Branch Councils in the United Kingdom shall include as members *ex officio* the twenty-four members of the Council elected under By-law 45, but shall not include those elected by the Representative Body except resident in the area of that Branch."

By BOURNEMOUTH DIVISION:

That the Representative Body supports the recommendations contained in the interim report of Lord Cave's Committee with reference to the disposal in the interests of hospitals, of the surpluses of approved societies; that it instructs the Insurance Acts Committee to approach the Ministry of Health and the approved societies with a view to establishing upon a just basis a satisfactory method of payment by the approved societies to the various hospitals for their treatment of insured persons.

By SOUTH SUFFOLK DIVISION:

That the British Medical Association be asked to reconsider the question of the treatment of school children by the education authorities, with a view to the more general employment of the general practitioner.

LIBRARY OF THE BRITISH MEDICAL ASSOCIATION.

A LIST of periodical publications, official reports, and Blue Books in the Library of the British Medical Association available for issue to members on loan has been printed, and copies can be obtained free on application to the Librarian at the house of the Association, 429, Strand, W.C. The regulations governing the loan of these publications are stated in the introduction to the list. The Library is open for consultation from 10 a.m. till 6.30 p.m. (on Saturdays 10 a.m. till 2 p.m.).

GENERAL COUNCIL
OF
MEDICAL EDUCATION AND REGISTRATION.

SUMMER SESSION, 1921.

Sir DONALD MACALISTER, K.C.B., President, in the Chair.

MEDICAL EDUCATION REGULATIONS.

DR. MACKAY (Chairman of the Education Committee) called attention, on May 24th, to the changes which had been made in the Council's regulations consequent upon the decisions of the Council arrived at last session, and fully reported in the BRITISH MEDICAL JOURNAL, December 4th, 1920 (page 150). He read the revised copy of the regulations now sent to medical schools and intending students.

RESULTS OF QUALIFYING EXAMINATIONS.

Dr. NORMAN WALKER presented a report of the Examination Committee containing an analysis of the annual tables for 1920. As a result of the resolution of the Council passed a year ago, the information supplied by licensing bodies as to whether they did or did not examine in operative surgery, ophthalmology, and mental diseases, was now complete so far as it went. Of the 23 bodies granting primary qualifications, eight gave passes and rejections in operative surgery, and six stated that it was included under surgery; nine gave passes and rejections in ophthalmology or ophthalmic surgery, and three stated that it was included under surgery; ten gave passes and rejections in mental diseases, and six stated that it was included under medicine. The others in each case stated that there was no examination or no special examination in these subjects. The table dealing with exemptions showed these to be exceptionally numerous; many of these were due directly or indirectly to the war, others to increasing readiness to accept the examinations of other bodies. With regard to the Council's inspection of final examinations, this was not yet completed. That in medicine was almost finished, but there were still seven bodies to be inspected in surgery and eight in midwifery.

The report was adopted.

INSPECTION OF PUBLIC HEALTH EXAMINATIONS.

Sir JOHN MOORE submitted the report of the Public Health Committee. The annual returns of professional examinations held in 1920 for diplomas in public health showed that 453 candidates were examined for the first examination, of whom 342 passed and 111 were rejected, and that 463 candidates presented themselves for the second and final examination, of whom 373 were successful and 90 failed. During the year the English Conjoint Board had granted exemptions from the rules of the Council in regard to such diplomas to seven out of 142 candidates, the University of Liverpool to eight out of 33 candidates, and the Victoria University of Manchester to one out of 43. The Committee deferred its detailed remarks on the inspection of examinations until this inspection had been completed. It was hoped to present to the Council at the next session a final report on this inspection and on the proposed revision of the resolutions and rules for diplomas in public health which would issue therefrom. He moved that a special meeting of the Public Health Committee be sanctioned for the last week in September with a view to the preparation of a considered report to lay before the Council.

Dr. J. C. MCVAIL, in seconding this motion, said that there were a number of questions relating to the practical training and examination of the medical officer of health to be considered—whether, for example, too much attention was devoted to sanitary law and too little to vital statistics—and it would be impossible to dispose of all these matters in an ordinary session of the Council unless the Committee was prepared beforehand to give a lead with definite proposals.

The motion was agreed to, and it was understood that the matter would be fully debated at the November session.

DENTAL EDUCATION AND EXAMINATION.

Sir JAMES HODSDON submitted the report of the Dental Education and Examination Committee. He said that at the last session the Council passed certain resolutions relating to the educational requirements at the registration of medical students, to come into operation on January 1st, 1923. If any of these resolutions were to apply to dental students it was important that the existing rules on this subject should be modified accordingly during the present session. The Departmental Committee on the Dentists Act (February, 1919) considered it essential that a student in ordinary circumstances should have passed a preliminary examination in general education, which should be the same for dental as for medical students, that a student who had completed a course of study at a secondary school up to the age of 18 would probably be in a better position to profit from a course of professional study than a student at 16, the age at which dental students might commence such study, and, further, that a course of study in chemistry and physics should form a portion of the normal school course. These recommendations were similar to the resolutions of the Council in regard to professional education in general, and his Committee, therefore, was of opinion that the preliminary examination and registration required of candidates for licences in dentistry or dental surgery should be the same for dental students as for medical students, and that the resolutions of the General Medical Council of 1898 be modified so as to provide:

I. (*a*) That before registration in the Dental Students' Register every applicant shall be required to have passed, in addition to the examination in general education, an examination in elementary physics and elementary chemistry conducted or recognized by one of the licensing bodies. (*b*) That before registration as a dental student every candidate shall produce evidence that he has attained the age of 17 years. Provided that the minimum standard of general education required by the Council for registration as a dental student should be raised to a standard equivalent to that demanded in other learned professions previously to, or concurrently with, the coming into operation of the requirements of a preliminary examination in science before registration.

II. That the requirements contained in the above recommendation come into operation on January 1st, 1923.

Dr. J. T. MACKAY heartily supported the recommendation of the Committee that the preliminary examination required of candidates should be the same for dental students as for medical students. All educational bodies in the country were raising the standard of preliminary education required among those who were intending to enter the learned professions, and the action of the Council, if it carried into effect the recommendation of the Committee, would be in a line with this policy.

The report was received and the recommendation adopted.

STUDENTS' REGISTRATION.

Sir NORMAN MOORE moved, and Dr. MACKAY seconded, the reception of the report of the Students' Registration Committee, which was merely a statement of seven applications for registration and antedating of professional studies under exceptional circumstances, and the manner in which each case had been dealt with. Since the previous report in November, 101 medical students and 27 dental students had had their registration antedated in accordance with precedent.

The report was received.

RECOGNITION OF EXAMINATIONS.

Dr. J. T. MACKAY (Chairman of the Education Committee) informed the Council that his Committee had recognized the shortened Matriculation Examination of the University of London, and also the Senior Public Examination of the University of Queensland, and that these would be inserted in the list of examinations recognized by the Council when next published.

ELECTIONS TO COMMITTEES.

The following were elected members of Committees on the nominations of the Branch Councils:

Education Committee.—Sir Francis Champneys, Dr. Howden, Sir Norman Moore (England); Sir James Hodsdon, Dr. Mackay, Professor Littlejohn (Scotland); Sir Arthur Chance, Dr. Dixon, Mr. Sinclair (Ireland).

Examinations Committee.—Sir Gilbert Barling, Dr. Caton, Dr. J. A. Macdonald (England); Dr. Adams, Dr. Russell, Dr. Norman Walker (Scotland); Sir Arthur Chance, Dr. Coffey, Sir John Moore (Ireland).

Public Health Committee.—Dr. Dean, Sir George Newman, Sir Jenner Verrall (England); Dr. Matthew Hay, Professor Littlejohn, Dr. McVail (Scotland); Sir E. Coey Bigger, Dr. Magennis, Sir John Moore (Ireland).

APPOINTMENT OF REGISTRAR.

On the proposition of Dr. NORMAN WALKER, Colonel Norman C. King was re-elected by acclamation registrar for another year. The Council afterwards considered certain matters *in camerâ*, as to which no public statement was issued, and then concluded its proceedings after the shortest session of recent years.

Correspondence.

Dr. Macdonald's Mission to South Africa.

SIR,—The letter of Drs. Mackenzie and Napier which appeared in the SUPPLEMENT of May 28th (p. 202) is justified in that, in the report to Council of my visit to South Africa in the issue of March 12th (p. 70), there is clearly a misrepresentation of what took place at the Durban conference. I need hardly say that this was unintentional, and was probably due to the fact that my report was verbal, and therefore liable to be inaccurate.

If Drs. Mackenzie and Napier will take the trouble to transfer the words "A keen discussion took place during which" from where they stand to the sentence beginning "Dr. Macdonald said," etc., they will see what it was my intention to convey to the Council. These words being thus transferred the true context of the intermediate sentences will be evident. This, however, does not in any way justify my error, and I trust these gentlemen will accept my apologies for the misrepresentation.

I cannot, however, accept the statement that I entirely misunderstood the position of the Witwatersrand Branch; I think I had a very clear conception of it. I never referred to the Witwatersrand Branch as a Branch. I stated that the movement to form a new association originated in the Branch, and I think that is true. Surely Dr. Napier was the great protagonist of that movement.

Drs. Napier and Mackenzie argue in their letter with regard to the deliberations of the Joint Committee. I did not deal with that period at all. I stated that in the movement to establish a new association two strong planks in the platform of the originators were the inability of the British Medical Association to carry on collective bargaining and the necessity for the new association being on the lines of a trade union. In confirmation of these statements let me quote a few speeches of Dr. Napier:

The Committee appointed by the Witwatersrand Branch, of which Dr. Napier was the convener, reported (*Medical Journal of South Africa*, August, 1919, p. 20) that in dealing with contract practice "in future it must be a question of collective bargaining . . . public and private bodies requiring the services of medical men . . . must come to terms with the medical profession as a whole or its mouthpiece as to the nature of the services required. This result can only be obtained by co-operation, association or union. Whichever name it be called by the objects are identical. It cannot be accomplished through the British Medical Association." Dr. Napier in his introductory speech frequently spoke of the necessity of forming "a union." "Trade unionism only exists practically amongst skilled trades, and in England it has never numbered 50 per cent. of those engaged in skilled trades. Yet look at the control it has over the trade conditions of the United Kingdom. We could do exactly the same. If we go to other unions and say: 'This union is for the improvement of conditions of work; it not only affects us but you, because as we improve the conditions of our work we also improve the conditions of work with reference to yourselves'; do you suppose we shall not get their support?" In his speech at a meeting of the Witwatersrand Branch, October 16th, 1919, Dr. Napier spoke of the two functions of the proposed new association—(1), a medical and scientific body, and (2), "the function of a trade union." Later he said: "Collective bargaining must be to any body of men of greater value than individual bargaining. . . . The difficulty is that the British Medical Association cannot do it for us." "What your Committee [of which he was convener] is contemplating is quite evidently of the nature of a trades union because collective bargaining is the essence of trades unionism, and it is evident that the British Medical Association cannot help us." Dr. Irvine asked if it was proposed that the new association should join the Federation of Trades. Dr. Napier: "I am not proposing that at present. Personally I should be satisfied to do it."

At the first meeting of the South African Medical Association held on November 13th, 1919 (reported in the *Medical Journal of South Africa*, November, 1919) Dr. Napier was elected president and was reported as saying, "One of the objects of our association is to adopt the principles of trade unionism."

Other people are evidently of the same opinion as I am. For example, Dr. J. A. Mitchell, in proposing the toast of "the British Medical Association and the Medical Profession in South Africa" at the annual dinner of the Witwatersrand Branch, said (*Medical Journal of South Africa*, January, 1920, p. 145), in speaking of the new association, "Its main objects seem to be the organization of the profession on trade union lines."

Sir Spencer Lister, in a discussion at the Witwatersrand Branch, July 29th, 1920 (*Medical Journal of South Africa*, p. 270), said, "Originally Dr. Napier was very keen on the trade union principle; now he told them that there were to be no trade union objects in the constitution; nevertheless the bulk of the profession still believed that the principal plank of the South African Medical Association was trade unionism."

With regard to the last paragraph of the letter by Drs. Mackenzie and Napier:

No. 1. I do not propose to touch this; it is a question the South African men understand, but I don't.

No. 3. I am delighted to know that they do not want a trade union, and should have been much disappointed if either of the signatories did want it.

No. 2. With regard to this, I fear it is a dream not likely to be realized; in addition, it is a little contradictory of 3, as surely an Association which can force its members to obey its decision is a trade union *in excelsis*. I cannot believe that any association of private citizens would be granted a Memorandum of Association which would confer that power. Besides, the members could at any time resign.

I regret exceedingly that this incident has arisen through my carelessness; it tends to cast a cloud over the memory of a visit, during which everyone showed me the height of courtesy and kindness.—I am, etc.,

Taunton, June 6th. J. A. MACDONALD.

Hospital Treatment of Insured Persons.

SIR,—Ever since the issue of the Report by the Consultative Council on Medical and Allied Services, and the discussion of that report by the Divisions, there has been a difficulty which I foresee will become more and more prominent as the scheme outlined in the report is slowly but gradually realized. I refer to the question of the remuneration of panel practitioners for services rendered to their insured patients while inmates of a primary health centre. This difficulty is also being brought prominently forward in connexion with schemes for extending hospital accommodation so as to admit paying patients, and also by the present financial straits of the voluntary hospitals. Here it is beginning to be realized that when a hospital treats an insured person it ought to be paid for so doing, and that the surplus funds of friendly societies should be drawn upon for that purpose. It has also been suggested that the panel practitioner should surrender a portion of his capitation grant for those of his insured patients who are being treated at a general hospital.

The majority of panel practitioners are dissatisfied with the terms the British Medical Association obtained for them during the recent negotiations with the Ministry of Health. I believe this has been due, to a large extent, to the apathy of individual members. They do not bestir themselves until the last moment and then they expect to find a good case already prepared for them, safeguarding all their most cherished interests. This turns out to be impossible in the time left, and a hurried, imperfect case is presented. Then when a new agreement is brought out its imperfections are only too plain and there are shoals of abusive and complaining letters. But it is *too late* then; the thing is arranged and to have it altered would break the agreement. Again, the Insurance Acts Committee, and also the individual practitioners, do not appear in many instances to be able to visualize where certain clauses of an agreement lead to, where a certain method of presenting their case may be used against the interests of those they represent, at some future time and in connexion with matters which everybody knows are going to crop up in the very near future. You have only to read the Insurance Acts Committee's arguments during the last negotiations with the Ministry to get a splendid example of what I mean. Panel practitioners' lists are now limited to 3,000, with powers to make it any less figure, and it is admitted by the Insurance Acts Committee that that is all that a panel practitioner can properly attend to. How now if the Ministry extend the scope of the Insurance Act? I leave it to panel practitioners with lists bordering upon 3,000 to think how they will be placed should the Acts be extended.

The capitation grant was fixed with certain conditions in existence. A panel practitioner always has a certain number of his panel patients in hospital. He is therefore doing less work—that is, earning his grant more easily—than he would have to do had there been no hospitals. Not only this, but the amount of time and labour spent upon his patients varies directly with the facilities at his disposal for doing the thousand and one things that could be done in a primary health centre.

In order to make my meaning quite clear, for I think the point is of immense importance, I will mention some of the things a "general practitioner of ordinary professional competence and skill" could do with a hospital bed at

the disposal of each of his panel patients: washing out stomach, analysis of stomach test meals chemically and bacteriologically, examination of pathological fluids, excretions, secretions, examination of heart cases with polygraph, *x*-ray examinations, methods of treatment only applicable under skilled observation. There are innumerable things he could do in the hospital. And, mark you, this list always tends to grow, for, as medical science progresses, new and simpler methods are found for doing this or that test, new methods of treatment requiring skilled observation over an extended period are discovered. I dare say a few panel practitioners do a few of these things for a few of their patients already. But what is done is very little to what could and ought to be done now the capitation fee is fixed in relation to the existing facilities for doing this kind of work.

If these facilities are to be largely increased by dotting the whole country with primary health centres, the panel practitioner will be compelled, by competition alone, to make use of them to the full and do all these things, and up will go the time spent on his panel patients but with no corresponding monetary return.

The argument of Dr. Charles E. S. Flemming in the SUPPLEMENT of May 28th, p. 202, that institutional treatment cures the patient quicker and so requires less attendance by the medical man, is not valid in the conditions under which the panel practitioner works. Most of the ailments I am referring to are chronic and incurable, and the panel patient attends his doctor for a time, and either gets patched up for a while, or gets tired of attending and receiving no appreciable benefit and jogs along with his own home remedies. But the time and trouble involved in the present method of treating, in their own homes or at the practitioner's consulting rooms, chronic gastric complaints, for example, is much less than the time and trouble involved in treating the same patients adequately and with all the resources of a hospital at his disposal. And for this extra time and trouble the panel practitioner ought to be paid, even although the work is within his ordinary competence and skill, for his remuneration was computed according to a certain state of affairs with regard to the time occupied, with regard to the general habit of panel practitioners in doing certain things for their patients, and with regard to the limitation of his ordinary competence and skill, by the conditions under which he carried out his work. If now, without altering other things the facilities for exercising his ordinary competence and skill are to be greatly increased, then he ought to be remunerated in strict accord with the new conditions.—I am, etc.,

Pelaw-on-Tyne, June 1st. A. BENHAM STICH.

INSURANCE.

POSITION OF INSURANCE ACTS COMMITTEE.

THE following circular letter (M. 31) has been addressed by the Medical Secretary to the Honorary Secretaries, Chairmen, and Representatives of Local Medical and Panel Committees, and (for their information) to the Honorary Secretaries of Divisions and Branches of the British Medical Association:

British Medical Association,
Medical Department

The attention of the Insurance Acts Committee has been drawn to the issue to all Panel Committees of a circular by the Association of Panel Committees, urging those committees to drop their connexion with the Insurance Acts Committee and form a new body to be elected directly and solely by Panel Committees. The Association of Panel Committees encloses a copy of its circular issued in February, 1918. To this a reply was issued by the Insurance Acts Committee on February 23rd, 1918, of which I enclose a reprint (M. 22, 1917–18).* The only material alteration required in that reply is that the larger number of direct representatives of Panel Committees the Committee then suggested is now an accomplished fact. The Insurance Acts Committee stands by its 1918 circular, and requests Panel Committees to give it their careful consideration. As many copies of it as are required will be sent to any Panel Committee asking for them.

I am instructed to add the following points:

(A) The Insurance Acts Committee has been the authorized mouthpiece of insurance practitioners since the service came into being. It has not, of course, secured for those practitioners all it has tried to obtain, but it can claim a very large measure of success, due to the loyal support of its constituents.

(B) The advocates of a new body have taken advantage of nearly every conference to try to upset the position of the Insurance Acts Committee, and have been heavily defeated on every occasion. In October last a straight vote was taken on the following motion, and the advocates of the new body got only 16 votes out of the 125 representatives present:

> That in place of the Insurance Acts Committee as the negotiating body an independent and directly elected body be constituted, this body to be nominated by the Annual Conference of the Representatives of Panel and Local Medical Committees of the country.

As these conferences are freely elected by the Local Medical and Panel Committees of the country, no limitation being put on them that their representatives shall be members of the British Medical Association, the onus of bringing forward new facts to influence the Panel Committees to override the decision of the conference lies on the advocates of the new body. No new facts are given in their latest circular.

(C) Panel Committees should examine very carefully the finance of the revived proposal. It is doubtful how far the statutory funds of Panel Committees could be used for all the needs of such a new body. The attempts to raise money by a voluntary fund have not so far been encouraging. The Committees concerned in the new proposal have held aloof from the National Insurance Defence Trust, and there is no certainty that they could be relied upon for regular and sufficient financial support, even if their proposal were adopted.

(D) The Insurance Acts Committee has gradually acquired a status with the Government and the Ministry of Health which is of the utmost value to insurance practitioners as a whole. That status and influence would have been still greater if some Panel Committees had not withheld their support. Troublous times are in store for insurance practitioners, as anyone can see who considers the present economic condition of the country and the avowed intention of the Government to reduce expenditure all round in the coming year. This is no time for "swopping horses."

(E) The Insurance Acts Committee with confidence asks the Panel Committees of the country to decline the invitation of the Association of Panel Committees, and also to invite the Panel Committees forming that body, after the repeated evidence they have had of the intention of Panel Committees generally to support the Insurance Acts Committee, to fall into line with the majority. Their acceptance of the situation would be cordially welcomed and their co-operation would be an accession of strength, not merely to the Insurance Acts Committee, but to the whole of the organized insurance practitioners of the country. Their present attitude is bad for all parties concerned—except sometimes for those with whom we have to negotiate.

Finally, the Insurance Acts Committee sincerely hopes that this effort of the Association of Panel Committees may be the means of eliciting an expression of opinion which will convince that body first that it is on the wrong tack, and secondly that, if it is anxious (as the Insurance Acts Committee believes it is) to work for the better organization of Panel Committees, it will do well to throw in its lot with the majority and do its best to improve, from the inside, any defects it may find in the procedure or policy of the Conference of Local Medical and Panel Committees and its duly authorized central negotiating body the Insurance Acts Committee.

429, Strand, W.C.2.
June 2nd, 1921.

* See SUPPLEMENT, March 9th, 1918, p. 29.

Naval and Military Appointments.

ROYAL NAVAL MEDICAL SERVICE.

THE following appointments are announced by the Admiralty:—Surgeon Commanders: A. J. Wernet to the *Pembroke*, additional, F. A. Robinson to the *Vivid* for H.M. Dockyard.

ROYAL NAVAL VOLUNTEER RESERVE.

Surgeon Lieut. Commander J. B. Ronaldson to the *Royal Oak*, additional.

ARMY MEDICAL SERVICE.

ROYAL ARMY MEDICAL CORPS.

Major W. W. Browne, O.B.E., relinquishes the acting rank of Lieut.-Colonel.

Captain A. Rodd is placed on the half-pay list on account of ill health.

Temporary Captain G. J. McGorty, M.C., to be Captain, with seniority October 19th, 1919 (substituted for notification in the *London Gazette* of April 26th, 1921).

Captain G. W. Rose, from S.R., to be Captain, with seniority October 10th, 1918 and precedence next below R. B. Myles.

The following officers relinquish their commissions: Temporary Major J. F. O'Malley and retains the rank of Major. Temporary Captains and retain the rank of Captain: D. L. Lindsay, R. J. Snider, R. A. Shekleton.

To be temporary Lieutenants: D. Loughridge, W. B. Fox.

INDIAN MEDICAL SERVICE.

Colonel J. K. Close, Inspector-General of Civil Hospitals, United Provinces, has been granted combined leave for six months, with effect from April 12th, or the subsequent date on which he may avail himself.

Lieut.-Colonel R. G. Turner, C.M.G., D.S.O., has been appointed to officiate as Inspector-General of Civil Hospitals, United Provinces.

Lieut.-Colonel W. Young has been appointed to be Inspector-General of Civil Hospitals, Central Provinces (April 2nd).

Lieut.-Colonel E. V. Hugo, C.M.G., Professor of Surgery, King Edward Medical College, Lahore, has been granted combined leave for twelve months (April 4th).

Major H. H. Broome, Professor of Anatomy, King Edward Medical College, Lahore, has been appointed to officiate as Professor of Surgery in that College.

Captain P. B. Bharucha, I.S.O., O.B.E., has been appointed to officiate as Professor of Anatomy, King Edward Medical College, Lahore.

The following officers have been reappointed to the Personal Staff of His Excellency the Viceroy and Governor-General:—To be honorary Surgeons: Lieut.-Colonel E. V. Hugo, C.M.G., Major A. E. J. Lister, Lieut.-Colonel B. R. Chatterton, Lieut.-Colonel R. McCarrison, Lieut.-Colonel D. W. Sutherland, C.I.E.

Major F. Stevenson has been posted as Civil Surgeon, Hazara (April 1st).

Lieut.-Colonel A. W. T. Buist, M.D., has been permitted to retire from the service (February 1st).

SPECIAL RESERVE OF OFFICERS.

ROYAL ARMY MEDICAL CORPS.

The following officers relinquish their commissions: Captain O. Williams, and is granted the rank of Major. Captains J. A. Musgrave and D. B. Robertson, and retain the rank of Captain.

TERRITORIAL FORCE.

ROYAL ARMY MEDICAL CORPS.

To be Majors: Captain G. T. Willan, D.S.O., February 16th, 1920 (substituted for notice in the *London Gazette* of February 11th, 1921), Captain C. T. Corfield, S. E. Rigg, G. Potts.

To be Captains:—Captains: E. S. Stork, D.S.O., from T.F.Res., with precedence as from April 1st, 1915, next below Captain J. A. Stephens; David Stewart (late R.A.M.C.S.R.), with precedence as from August 5th, 1917; A. G. Williams (late R.N.V.R.), with precedence as from September 4th, 1918

D. M. Lindsay to be Lieutenant.

TERRITORIAL FORCE RESERVE.

ROYAL ARMY MEDICAL CORPS.

The following officers, having attained the age limit, are retired: Major W. G. Willoughby, and retains the rank of Major, with permission to wear the prescribed uniform. Captain S. Hodgson, and retains the rank of Captain.

DEFENCE FORCE.

ARMY MEDICAL SERVICE.

To be Assistant Directors of Medical Services:—Temporary Colonels: A. D. Sharp, C.B., C.M.G., T.D., and F. H. Westmacott, C.B.E., T.D.

To be temporary Captains: W. J. Harrison, J. E. B. Coleman, J. F. Weston, T. B. Batchelor (substituted for notification in *London Gazette*, May 25th, 1921, appointing this officer as temporary Major).

1st (South Midland) Field Ambulance (D.F.).—To be temporary Captains: C. W. J. Brasher, J. H. Sheldon.

DIARY OF SOCIETIES AND LECTURES.

ROYAL COLLEGE OF PHYSICIANS, Pall Mall East, S.W.—Tues. and Thurs., 5 p.m., Croonian Lectures by Dr. F. L. Golla: The Objective Study of Neurosis.

ROYAL SOCIETY OF MEDICINE.—General meeting of Fellows, Thurs., 8.30 p.m. Discussion: The Problem of the Private Clinic System in Great Britain. To be opened by Sir Thomas Horder, followed by Dr. G. C. Anderson, Mr. Clayton-Greene, Mr. W. S. Dickie, Mr. Bishop Harman, Dr. A. F. Hurst, Dr. Drury Pennington, Sir Humphry Rolleston, Dr. Gilbert Scott, and Dr. Maurice Wright. *Section of Dermatology:* Thurs., 4.30 p.m., Cases.

ROYAL SOCIETY OF TROPICAL MEDICINE AND HYGIENE, 11, Chandos Street, W.1.—Fri., 7.45 p.m., Demonstration; 8.15 p.m., Annual General Meeting, to be followed by a paper by Major R. Knowles: The Mechanism and Treatment of Snake-bite in India.

WEST LONDON MEDICO-CHIRURGICAL SOCIETY, Kensington Town Hall.—Fri., 8 p.m., Cavendish Lecture by the Right Hon. Dr. C. Addison, M.P.: The Part of the State in the Prevention of Disease.

POST-GRADUATE COURSES AND LECTURES.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—Thurs., 4 p.m., Dr. Thursfield: Mongols.

INSTITUTE OF PATHOLOGY AND RESEARCH, St. Mary's Hospital, Paddington, W.—Thurs., 4.30 p.m., Professor W. Bulloch, F.R.S.: Use and Abuse of Scientific Medical Literature.

LONDON HOSPITAL MEDICAL COLLEGE, E.—Mon., 5 p.m., Dr. W. M. Feldman: Ante-natal and Post-natal Child Physiology. Tues. and Fri., 5.15 p.m., Dr. M. Culpin; Psycho-neuroses. *Surgical Unit*, Mr. R. Warren, Tues., 4.15 p.m., Ventral Hernia; Wed., 4.15 p.m., Suppuration of the Lung.

MANCHESTER ROYAL INFIRMARY.—Tues., 4.30 p.m., Dr. E. B. Leech: Blood Pressure.

NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC, Queen Square, W.C.—Mon., Tues., Thurs., Fri., 2 p.m.: Out-patient Clinics. Mon., 3.30 p.m., Dr. A. Turner: Demonstration of Cases. *Lectures:* 3.30 p.m., Tues., Mr. Armour: Surgical Treatment of Spinal Cord Tumours; Wed., Mr. L. Paton: Papilloedema; Thurs., Dr. F. Buzzard: Poliomyelitis.

NORTH-EAST LONDON POST-GRADUATE COLLEGE, Prince of Wales's General Hospital, Tottenham, N.15.—Daily, 2 p.m., In- and Out-patient Clinics, Operations, etc. *Lecture-Demonstrations:* 3 p.m., Tues., Mr. C. H. Hayton: Anatomy of the Nose and Accessory Sinuses; Wed., Mr. W. E. Tanner: Clinical Pathology and Differential Diagnosis of Scrotal Enlargements; Fri., Mr. T. H. C. Benians: Blood Examination in Diagnosis.

QUEEN'S HOSPITAL FOR CHILDREN, Hackney Road, E.—Mon., 4 p.m., Mr. W. P. T. Atkinson: Tinea Tonsurans and its Treatment by X Rays. Tues., 4 p.m., Dr. S. A. Owen: The Premature Baby. Thurs., 12 noon, Mr. V. Nesfield: Treatment of Corneal Ulcers by Subconjunctival Injection of Phenolaine Solution. Fri., 3.30 p.m., Dr. J. L. Bunch: Skin Diseases in Children.

WEST LONDON POST-GRADUATE COLLEGE, Hammersmith, W.—Daily, 10 a.m., Ward Visits; 2 p.m., In- and Out-patient Clinics and Operations. *Lectures:* Mon., 4.15 p.m., Dr. A. Saunders: Gastric Disorders in Old Age; Tues., Dr. H. Pritchard: Chronic Infective Processes; Thurs., 5 p.m., Dr. Harry Campbell: Observations on Diet; Fri., Mr. Baldwin: Surgery of the Rectum.

British Medical Association.

OFFICES AND LIBRARY, 429, STRAND, LONDON, W.C.2.

Reference and Lending Library.

THE READING ROOM, in which books of reference, periodicals, and standard works can be consulted, is open to members from 10 a.m. to 6.30 p.m., Saturdays 10 to 2.

LENDING LIBRARY: Members are entitled to borrow books, including current medical works; they will be forwarded, if desired, on application to the Librarian, accompanied by 1s. for each volume for postage and packing.

Departments.

SUBSCRIPTIONS AND ADVERTISEMENTS (Financial Secretary and Business Manager. Telegrams: Articulate, Westrand, London).
MEDICAL SECRETARY (Telegrams: Medisecra, Westrand, London).
EDITOR, *British Medical Journal* (Telegrams: Aitiology, Westrand, London).
Telephone number for all Departments: Gerrard 2630 (*3 lines*).

SCOTTISH MEDICAL SECRETARY: 6, Rutland Square, Edinburgh. (Telegrams: Associate, Edinburgh. Tel.: 4361 Central.)
IRISH MEDICAL SECRETARY: 16, South Frederick Street, Dublin. (Telegrams: Bacillus, Dublin. Tel.: 4737 Dublin.)

Diary of the Association.

JUNE.

14 Tues. Hastings Division, Eversfield Hotel, Hastings, 4.30 p.m.
Isle of Ely Division: Address by the Medical Secretary.
15 Wed. South-Western Branch Annual Meeting, White Hart Hotel, St. Austell, 3.15 p.m.; Luncheon, 1 p.m. to 2.15 p.m.; Annual Dinner, 7.45 p.m.
16 Thurs. Central Division, Birmingham Branch, Annual Meeting, 18, Bennett's Hill, 3.45 p.m.
Hampstead Division, Annual Meeting, Hampstead General Hospital, Haverstock Hill, 5 p.m.
17 Fri. London: Standing Subcommittee, Central Ethical Committee, 2 p.m.
Sheffield Division, Church House, St. James Street, Sheffield, 8.30 p.m.
22 Wed. London: **Council.**
23 Thur. South Wales and Monmouthshire Branch: Annual meeting, Council Chamber, Barry, 3.30 p.m.
24 Fri. Metropolitan Counties Branch Annual Meeting, 429, Strand, W.C.2, 4 p.m.
29 Wed. London: Propaganda Subcommittee, 2.15 p.m.
Oxford and Reading Branch Annual Meeting, Town Hall, Maidenhead.
30 Thur. Worcestershire and Herefordshire Branch: Annual Meeting, The Infirmary, Worcester, 3 p.m.

JULY.

1 Fri. Cambridge and Huntingdon Branch, Annual Meeting, Harlech House, Burwell, 12.30 p.m. Luncheon, 1.30 p.m. Presidential Address, 2.45 p.m.
8 Fri. Surrey Branch Annual Meeting, Guildford.
15 Fri. East Yorks and North Lincoln Branch, Annual Meeting, Grimsby.

APPOINTMENTS.

BRANSGROVE, W. S. V., M.B., Ch.B., New Zealand, Senior House-Surgeon, Royal Ear Hospital (Ear, Nose, and Throat Department, University College Hospital).

BROWN, A. Middleton, M.A., M.D.Aberd., D.P.H., Medical Officer of Health and School Medical Officer, City of Chester.

NATTRASS, Frederick J., M.D.Durh., M.R.C.P.Lond., Honorary Assistant Physician to the Royal Victoria Infirmary, Newcastle-upon-Tyne.

JESSOP HOSPITAL FOR WOMEN, SHEFFIELD.—*Senior Resident Officer:* R. J. B. Hall, M.B., Ch.B.Otago; *Assistant House-Surgeons:* C. H. Jaede, M.B., Ch.M.Syd., and G. J. Sophianopoulos, M.R.C.P., M.R.C.S.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 9s., which sum should be forwarded with the notice not later than the first post on Tuesday morning, in order to ensure insertion in the current issue.

BIRTHS.

FENN.—On June 5th, in a nursing home, Sheffield, to Beatriz, wife of Robert M. Fenn, M.B., C.M., etc.—a son (23, Ladysmith Avenue, Sheffield).

HERINGTON.—On May 29th, at Spratslade Drive, Longton, Staffs, the wife of Cecil Herington, M.B., B.S.Lond., M.R.C.S., L.R.C.P.—of a son.

MALLAM.—On June 2nd, at Lyndale, London Road, Redhill, the wife of Dalton Mallam, M.R.C.S., L.R.C.P.—of a son.

ROBERTS.—On June 1st, at 104, Midland Road, Bedford, to Dr. and Mrs. E. Cleaton Roberts—a son.

DEATH.

BIGGS.—May 29th, at 101, Northcote Road, Elizabeth, wife of M. G. Biggs, M.D.

Printed and published by the British Medical Association at their Office, No. 429, Strand, in the Parish of St. Martin-in-the-Fields, in the County of London.